

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 Filer ID (Ethics Commission Filers) 00069756	2 Total pages filed: 44	
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR The Honorable	FIRST Brooks Frederick	MI 	OFFICE USE ONLY Date Received ELECTRONICALLY FILED 01/16/2024
	NICKNAME	LAST Landgraf	SUFFIX	
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> Change of Address	ADDRESS / PO BOX; APT / SUITE #; CITY; 2331 Ladue Lane Odessa, TX 79762		ZIP CODE	Date Hand-delivered or Date Postmarked
				Receipt # Amount
				Date Processed
				Date Imaged
5 CAMPAIGN TREASURER NAME	MS / MRS / MR Mr.	FIRST D. Kirk	MI 	
	NICKNAME	LAST Edwards	SUFFIX	
6 CAMPAIGN TREASURER ADDRESS (Residence or Business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 5030 E. University Blvd., D-101 Odessa, TX 79762			
7 CAMPAIGN TREASURER PHONE	AREA CODE (432)	PHONE NUMBER 550-2320	EXTENSION	
8 REPORT TYPE	<input checked="" type="checkbox"/> January 15 <input type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only)			
	<input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded modified reporting limit <input type="checkbox"/> Final Report (Attach C/OH-FR)			
9 PERIOD COVERED	Month Day Year 07/01/2023	THROUGH	Month Day Year 12/31/2023	
10 ELECTION	ELECTION DATE Month Day Year 03/05/2024		ELECTION TYPE <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Runoff <input type="checkbox"/> Other <input type="checkbox"/> General <input type="checkbox"/> Special	
11 OFFICE	OFFICE HELD (if any) State Representative District 81		12 OFFICE SOUGHT (if known) State Representative District 81	

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

FORM C/OH
COVER SHEET PG 2

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13 C / OH NAME Landgraf, Brooks Frederick (The Honorable)	14 Filer ID (Ethics Commission Filers) 00069756
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15 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> Additional Pages	This box is for notice of political contributions accepted or political expenditures made by political committees to support the candidate / officeholder. <i>These expenditures may have been made without the candidate's or officeholder's knowledge or consent.</i> Candidates and officeholders are required to report this information only if they receive notice of such expenditures.									
<table border="1" style="width:100%"> <tr> <td style="width:25%;">COMMITTEE TYPE</td> <td>COMMITTEE NAME</td> </tr> <tr> <td><input type="checkbox"/> GENERAL</td> <td>COMMITTEE ADDRESS</td> </tr> <tr> <td><input type="checkbox"/> SPECIFIC</td> <td>COMMITTEE CAMPAIGN TREASURER NAME</td> </tr> <tr> <td></td> <td>COMMITTEE CAMPAIGN TREASURER ADDRESS</td> </tr> </table>	COMMITTEE TYPE	COMMITTEE NAME	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME		COMMITTEE CAMPAIGN TREASURER ADDRESS		
	COMMITTEE TYPE	COMMITTEE NAME								
	<input type="checkbox"/> GENERAL	COMMITTEE ADDRESS								
	<input type="checkbox"/> SPECIFIC	COMMITTEE CAMPAIGN TREASURER NAME								
	COMMITTEE CAMPAIGN TREASURER ADDRESS									

16 CONTRIBUTION TOTALS	1. TOTAL UNITEMIZED POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY)	\$	0.00
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	102,750.00
EXPENDITURE TOTALS	3. TOTAL UNITEMIZED POLITICAL EXPENDITURES	\$	5,882.86
	4. TOTAL POLITICAL EXPENDITURES	\$	162,533.99
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	127,999.57
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00

17 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

 The Honorable Brooks Frederick Landgraf
 Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said _____, this the _____ day of _____, 20_____, to certify which, witness my hand and seal of office.

_____ Signature of officer administering
 _____ Printed name of officer administering
 _____ Title of officer administering oath

SUBTOTALS - C/OH**FORM C/OH
COVER SHEET PG 3**

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18 FILER NAME Landgraf, Brooks Frederick (The Honorable)		19 Filer ID (Ethics Commission Filers) 00069756
20 SCHEDULE SUBTOTALS NAME OF SCHEDULE		SUBTOTAL AMOUNT
1.	<input checked="" type="checkbox"/> SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS	\$ 102,750.00
2.	<input type="checkbox"/> SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS	\$
3.	<input type="checkbox"/> SCHEDULE B: PLEDGED CONTRIBUTIONS	\$
4.	<input type="checkbox"/> SCHEDULE E: LOANS	\$
5.	<input checked="" type="checkbox"/> SCHEDULE F1: POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$ 144,115.65
6.	<input type="checkbox"/> SCHEDULE F2: UNPAID INCURRED OBLIGATIONS	\$
7.	<input type="checkbox"/> SCHEDULE F3: PURCHASE OF INVESTMENTS FROM POLITICAL CONTRIBUTIONS	\$
8.	<input checked="" type="checkbox"/> SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD	\$ 18,418.34
9.	<input type="checkbox"/> SCHEDULE G: POLITICAL EXPENDITURES FROM PERSONAL FUNDS	\$
10.	<input type="checkbox"/> SCHEDULE H: PAYMENT FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH	\$
11.	<input type="checkbox"/> SCHEDULE I: NON-POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS	\$
12.	<input type="checkbox"/> SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER	\$

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 1/11 Rpt: 4/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00060103) BP North America Employee PAC <hr/> 6 Contributor address; City; State; Zip Code Houston, TX 77079	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barcena, Kim <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Barcena, Tyler <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$5,000.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Rival Energy Services
Date 09/05/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Charles Butt Public Education PAC <hr/> Contributor address; City; State; Zip Code San Antonio, TX 78209	Amount of Contribution (\$) \$10,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Clay, Debbie <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Bonding Services		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 2/11 Rpt: 5/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 07/24/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cook, John <hr/> 6 Contributor address; City; State; Zip Code The Woodlands, TX 77382	7 Amount of Contribution (\$) \$10,000.00
8 Principal occupation / Job title (See Instructions) Manager		9 Employer (See Instructions) Petroleum Wholesale
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Cox, James <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/15/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crump, Paul <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762-5123	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Managing Partner		Employer (See Instructions) Sewell
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Drew <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 07/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Crutcher, Pam <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 3/11 Rpt: 6/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/03/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Dale, Betty <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79761-1224	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) President		9 Employer (See Instructions) Basin Answering Service
Date 12/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Edwards, D. Kirk <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) MacLondon Energy
Date 12/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Felker, Gary <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Felker Insurance Services, Inc.
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Fisher, Travis <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Fisher Jewelers
Date 10/02/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Foley & Lardner LLP Texas Campaign Fund <hr/> Contributor address; City; State; Zip Code Austin, TX 75201	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 4/11 Rpt: 7/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Funds Available for Involved Reporters <hr/> 6 Contributor address; City; State; Zip Code Athens, TX 75751	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Haner, Gary <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Harvey, Elizabeth <hr/> Contributor address; City; State; Zip Code Odessa, TX 79761-3527	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Hogan, Barbara <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00236489) KochPAC - Koch Industries, Inc. <hr/> Contributor address; City; State; Zip Code Wichita, KS 67220	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 5/11 Rpt: 8/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/23/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lawrence, Janet <hr/> 6 Contributor address; City; State; Zip Code Odessa, TX 79765	7 Amount of Contribution (\$) \$1,000.00
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Kirby's Kloset
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lee, Larry <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Leeco
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Linebarger Goggan Blair & Sampson, LLP <hr/> Contributor address; City; State; Zip Code Austin, TX 78760	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/27/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Lloyd Gosselink Rochelle & Townsend, P.C. <hr/> Contributor address; City; State; Zip Code Austin, TX 78701	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/08/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00397711) Magellan Midstream Holdings GP, LLC PAC <hr/> Contributor address; City; State; Zip Code Tulsa, OK 74121	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 6/11 Rpt: 9/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: C00225342) McGuire Woods Federal PAC Fund <hr/> 6 Contributor address; City; State; Zip Code Richmond, VA 23219-3916	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moak Casey PAC <hr/> Contributor address; City; State; Zip Code Austin, TX 78746	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Moralez, Trinidad <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$500.00
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) La Margarita Restaurant
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Oncor Texas State PAC <hr/> Contributor address; City; State; Zip Code Dallas, TX 75202-1234	Amount of Contribution (\$) \$1,500.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/22/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) PAC of the Independent Insurance Agents of Texas <hr/> Contributor address; City; State; Zip Code Austin, TX 78768	Amount of Contribution (\$) \$250.00
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 7/11 Rpt: 10/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/01/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pope, Clay <hr/> 6 Contributor address; City; State; Zip Code Austin, TX 78703	7 Amount of Contribution (\$) \$2,000.00
8 Principal occupation / Job title (See Instructions) Consultant		9 Employer (See Instructions) Self Employed
Date 12/16/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pradon, Donald <hr/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Pradon Construction & Trucking
Date 12/21/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Quiroz, Krista <hr/> Contributor address; City; State; Zip Code Odessa, TX 79766	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Manager		Employer (See Instructions) LCA
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sewell, Collin <hr/> Contributor address; City; State; Zip Code Odessa, TX 79762	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Sewell Family of Companies
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sivalls, C. Richard <hr/> Contributor address; City; State; Zip Code Odessa, TX 79768	Amount of Contribution (\$) \$2,500.00
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Sivalls, Inc.

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 8/11 Rpt: 11/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Sterling, Mike	7 Amount of Contribution (\$) \$1,000.00
6 Contributor address; City; State; Zip Code Odessa, TX 79762		
8 Principal occupation / Job title (See Instructions) Owner		9 Employer (See Instructions) Plains Enterprises
Date 08/11/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texans for Lawsuit Reform PAC	Amount of Contribution (\$) \$25,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Chemical Council / Association of Chemical Industry of Texas	Amount of Contribution (\$) \$1,000.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/28/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Medical Association PAC	Amount of Contribution (\$) \$250.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Society of Anesthesiologists PAC	Amount of Contribution (\$) \$1,500.00
Contributor address; City; State; Zip Code Austin, TX 78701		
Principal occupation / Job title (See Instructions)		Employer (See Instructions)

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 9/11 Rpt: 12/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Texas Trial Lawyers Association PAC	7 Amount of Contribution (\$) \$1,000.00
	6 Contributor address; City; State; Zip Code Austin, TX 78701	
8 Principal occupation / Job title (See Instructions)		9 Employer (See Instructions)
Date 08/24/2023	Full name of contributor <input checked="" type="checkbox"/> out-of-state PAC (ID#: <u>C90007923</u>) The Chickasaw Nation	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code Ada, OK 74820	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 08/24/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Union Pacific Corporation Fund for Effective Government	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Washington, DC 20005	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 07/26/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Valero PAC	Amount of Contribution (\$) \$2,500.00
	Contributor address; City; State; Zip Code San Antonio, TX 78269	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 12/07/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waddell, Mary Edith	Amount of Contribution (\$) \$500.00
	Contributor address; City; State; Zip Code Odessa, TX 79761	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Self

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 10/11 Rpt: 13/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wagner, Brenda	7 Amount of Contribution (\$) \$500.00
	6 Contributor address; City; State; Zip Code Odessa, TX 79762	
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 09/14/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Waste Management Employees Better Government Fund	Amount of Contribution (\$) \$3,000.00
	Contributor address; City; State; Zip Code Washington, DC 20004	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watt, Ashley	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Antina Cattle Co.
Date 09/06/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Watt, Christina	Amount of Contribution (\$) \$1,000.00
	Contributor address; City; State; Zip Code Houston, TX 77019	
Principal occupation / Job title (See Instructions) Rancher		Employer (See Instructions) Antina Cattle Co.
Date 07/19/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Weekley, Richard	Amount of Contribution (\$) \$1,500.00
	Contributor address; City; State; Zip Code Houston, TX 77055	
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) Weekley Properties

MONETARY POLITICAL CONTRIBUTIONS

SCHEDULE A1

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A1: Sch: 11/11 Rpt: 14/44
2 FILER NAME Landgraf, Brooks Frederick (The Honorable)		3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/07/2023	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Wingo Jr., Edward <hr style="border-top: 1px dotted black;"/> 6 Contributor address; City; State; Zip Code Odessa, TX 79762-4403	7 Amount of Contribution (\$) \$500.00
8 Principal occupation / Job title (See Instructions) Retired		9 Employer (See Instructions) Retired
Date 12/08/2023	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: _____) Withrow, Judy <hr style="border-top: 1px dotted black;"/> Contributor address; City; State; Zip Code Odessa, TX 79765	Amount of Contribution (\$) \$1,000.00
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) Self

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 1/18 Rpt: 15/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/27/2023	5 Payee name ADP Austin	
6 Amount (\$) \$345.97	7 Payee address; City; State; Zip Code 1405 N MoPac Expressway Austin, TX 78738	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing charges.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/03/2023	Payee name ADP Austin	
Amount (\$) \$132.77	Payee address; City; State; Zip Code 1405 N MoPac Expressway Austin, TX 78738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing charges.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name ADP Austin	
Amount (\$) \$132.77	Payee address; City; State; Zip Code 1405 N MoPac Expressway Austin, TX 78738	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing charges.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 2/18 Rpt: 16/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 07/05/2023	5 Payee name AT&T Mobility	
6 Amount (\$) \$100.10	7 Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/05/2023	Payee name AT&T Mobility	
Amount (\$) \$77.00	Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name AT&T Mobility	
Amount (\$) \$78.50	Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 3/18 Rpt: 17/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/05/2023	5 Payee name AT&T Mobility	
6 Amount (\$) \$78.50	7 Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/05/2023	Payee name AT&T Mobility	
Amount (\$) \$84.00	Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name AT&T Mobility	
Amount (\$) \$101.50	Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Cell phone service.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1	Total pages Schedule F1: Sch: 4/18 Rpt: 18/44	2	FILER NAME Landgraf, Brooks Frederick (The Honorable)	3	Filer ID (Ethics Commission Filers) 00069756
4	Date 11/18/2023	5	Payee name Ashley Garmon Photography		
6	Amount (\$) \$931.25	7	Payee address; City; State; Zip Code 5307 Bennett Ave Austin, TX 78751		
8	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photography for COH mailers.		
9	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 08/23/2023		Payee name Ector County Republican Women		
	Amount (\$) \$100.00		Payee address; City; State; Zip Code PO Box 14537 Odessa, TX 79768		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH donation.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	
	Date 11/16/2023		Payee name Franklin Creative		
	Amount (\$) \$2,744.04		Payee address; City; State; Zip Code 558 E. Castle Pines Pkwy Suite B4, PMB 333 Castle Pines, CO 78753		
	PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Solicitation/Fundraising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Fundraising mailer.		
	Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held	

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 5/18 Rpt: 19/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/16/2023	5 Payee name Franklin Creative	
6 Amount (\$) \$44,628.41	7 Payee address; City; State; Zip Code 558 E. Castle Pines Pkwy Suite B4, PMB 333 Castle Pines, CO 78753	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Christmas card.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Fuentes, Marco	
Amount (\$) \$1,230.88	Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2023	Payee name Fuentes, Marco	
Amount (\$) \$486.33	Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 6/18 Rpt: 20/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 08/28/2023	5 Payee name Fuentes, Marco	
6 Amount (\$) \$230.88	7 Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2023	Payee name Fuentes, Marco	
Amount (\$) \$230.88	Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2023	Payee name Fuentes, Marco	
Amount (\$) \$230.87	Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 7/18 Rpt: 21/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Payee name Fuentes, Marco	
6 Amount (\$) \$230.83	7 Payee address; City; State; Zip Code 333 E. Slaughter Lane Apt. 136 Austin, TX 78744	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/30/2023	Payee name Heritage of Odessa Foundation	
Amount (\$) \$2,000.00	Payee address; City; State; Zip Code PO Box 3908 Odessa, TX 79760	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Sponsorship of annual charity event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/08/2023	Payee name Hiller Printing, Inc.	
Amount (\$) \$97.43	Payee address; City; State; Zip Code 800 W University Odessa, TX 79764	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH note cards.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 8/18 Rpt: 22/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/16/2023	5 Payee name House Photography	
6 Amount (\$) \$125.00	7 Payee address; City; State; Zip Code PO Box 2910 Austin, TX 78768	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Printing Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Photos for COH purposes.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/30/2023	Payee name IRS	
Amount (\$) \$845.50	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Taxes	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign federal payroll taxes.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/30/2023	Payee name IRS	
Amount (\$) \$1,490.44	Payee address; City; State; Zip Code Internal Revenue Service Ogden, UT 84201	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Taxes	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign federal payroll taxes.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 9/18 Rpt: 23/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 12/22/2023	5 Payee name Krona Thimesch Campaign	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code 1301 Justin Rd. Suite 201-310 Lewisville, TX 75077	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH contribution.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Lancaster, Benjamin	
Amount (\$) \$3,175.00	Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/28/2023	Payee name Lancaster, Benjamin	
Amount (\$) \$1,564.46	Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 10/18 Rpt: 24/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 07/28/2023	5 Payee name Lancaster, Benjamin	
6 Amount (\$) \$1,564.46	7 Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2023	Payee name Lancaster, Benjamin	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 10/28/2023	Payee name Lancaster, Benjamin	
Amount (\$) \$1,750.00	Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 11/18 Rpt: 25/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 09/28/2023	5 Payee name Lancaster, Benjamin	
6 Amount (\$) \$1,750.00	7 Payee address; City; State; Zip Code 19419 Cloudy Bay Drive Pflugerville, TX 78660	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Landgraf, Brooks	
Amount (\$) \$1,316.25	Payee address; City; State; Zip Code 2331 Ladue Lane Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH mileage reimbursement for out of dist travel July-Dec (2025 m x \$0.65).
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/31/2023	Payee name Landgraf, Brooks	
Amount (\$) \$163.80	Payee address; City; State; Zip Code 2331 Ladue Lane Odessa, TX 79762	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel In District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH mileage reimbursement for travel in district July-Dec (252 m x \$0.65).
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 12/18 Rpt: 26/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 07/30/2023	5 Payee name Odessa Chamber of Commerce	
6 Amount (\$) \$500.00	7 Payee address; City; State; Zip Code 700 N Grant Ave #200 Odessa, TX 79761	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Sponsorship of annual teacher event.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/01/2023	Payee name Odessa College Foundation	
Amount (\$) \$1,500.00	Payee address; City; State; Zip Code 201 W University Blvd Odessa, TX 79764	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Sponsorship of annual scholarship event.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 07/28/2023	Payee name Poston, Mackenzie	
Amount (\$) \$369.40	Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 13/18 Rpt: 27/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 08/28/2023	5 Payee name Poston, Mackenzie	
6 Amount (\$) \$369.40	7 Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/28/2023	Payee name Poston, Mackenzie	
Amount (\$) \$1,369.40	Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/28/2023	Payee name Poston, Mackenzie	
Amount (\$) \$369.40	Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 14/18 Rpt: 28/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/28/2023	5 Payee name Poston, Mackenzie	
6 Amount (\$) \$369.40	7 Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/28/2023	Payee name Poston, Mackenzie	
Amount (\$) \$369.40	Payee address; City; State; Zip Code 516 E Slaughter Ln #201 Austin, TX 78744	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Salaries/Wages/Contract Labor	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Contract labor for campaign services.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/14/2023	Payee name Republican Party of Texas	
Amount (\$) \$750.00	Payee address; City; State; Zip Code 1108 Lavaca Suite 500 Suite 500 Austin, TX 78701	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Fees	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Primary Election Filing Fee.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 15/18 Rpt: 29/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 Date 08/02/2023	5 Payee name Safe Place of the Permian Basin
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6 Amount (\$) \$2,500.00	7 Payee address; City; State; Zip Code 700 N Grant Ave Odessa, TX 79762
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8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Sponsorship of annual charity event.
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9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/19/2023	Payee name Texas Pro Payroll
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Amount (\$) \$313.93	Payee address; City; State; Zip Code 2817 John Ben Shepperd #A101 Odessa, TX 79762
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Accounting/Banking	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign payroll processing charges.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/30/2023	Payee name Texas Workforce Commission
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Amount (\$) \$785.94	Payee address; City; State; Zip Code 101 E 15th St Austin, TX 78778
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Taxes	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Campaign Texas unemployment payroll taxes.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 16/18 Rpt: 30/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 07/06/2023	5 Payee name USAA	
6 Amount (\$) \$4,226.73	7 Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 08/04/2023	Payee name USAA	
Amount (\$) \$6,903.44	Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 09/05/2023	Payee name USAA	
Amount (\$) \$14,813.05	Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 17/18 Rpt: 31/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 10/05/2023	5 Payee name USAA	
6 Amount (\$) \$9,090.46	7 Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
9 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 11/04/2023	Payee name USAA	
Amount (\$) \$9,199.56	Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held
Date 12/05/2023	Payee name USAA	
Amount (\$) \$17,740.88	Payee address; City; State; Zip Code 9800 Fredericksburg Road San Antonio, TX 78288	
PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Credit Card Payment	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Credit card payment for expenditures reported on Schedule F4.
Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought Office held

POLITICAL EXPENDITURES FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee
Credit Card Payment

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: Sch: 18/18 Rpt: 32/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
4 Date 08/01/2023	5 Payee name West Texas Gifts of Hope	
6 Amount (\$) \$1,000.00	7 Payee address; City; State; Zip Code PO Box 891 Odessa, TX 79760	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Contributions/Donations Made By Candidate/Officeholder/Political Committee	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Sponsorship of annual charity event.
	9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	
	Candidate/Officeholder name	Office sought
		Office held

EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 1/12 Rpt: 33/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 09/03/2023	6 Payee name AT&T Mobility
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7 Amount (\$) \$200.70	8 Payee address; City; State; Zip Code PO Box 536216 Atlanta, GA 30353
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Wifi hotspot service for COH
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/01/2023	Payee name Adobe Systems Incorporated
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Amount (\$) \$298.27	Payee address; City; State; Zip Code 75 Remittance Dr Suite 1025 Chicago, IL 60675-1026
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH software.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 2/12 Rpt: 34/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 07/31/2023	6 Payee name Amazon.com
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7 Amount (\$) \$341.21	8 Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Office holder supplies for Office.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/26/2023	Payee name Amazon.com
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Amount (\$) \$261.26	Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Technology for COH purposes.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 3/12 Rpt: 35/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
--------------------------------------------------------------------	--------------------

5 Date 09/21/2023	6 Payee name Amazon.com
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7 Amount (\$) \$437.27	8 Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH office supplies and equipment.
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/29/2023	Payee name Amazon.com
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Amount (\$) \$215.42	Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder supplies for Capitol office.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 4/12 Rpt: 36/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
--------------------------------------------------------------------	--------------------

5 Date 10/08/2023	6 Payee name Amazon.com
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7 Amount (\$) \$408.43	8 Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder equipment and supplies.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/08/2023	Payee name Amazon.com
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Amount (\$) \$322.70	Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH supplies.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 5/12 Rpt: 37/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 12/02/2023	6 Payee name Amazon.com
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7 Amount (\$) \$156.69	8 Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH gift wrapping supplies.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/16/2023	Payee name Amazon.com
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Amount (\$) \$251.47	Payee address; City; State; Zip Code Box 81226 Seattle, WA 98108-1226
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH tech items.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 6/12 Rpt: 38/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 11/16/2023	6 Payee name Apple Store Domain Northside
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7 Amount (\$) \$1,837.00	8 Payee address; City; State; Zip Code 3121 Palm Way Austin, TX 79758
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Office Overhead/Rental Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH technology.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 07/08/2023	Payee name Armic Systems
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Amount (\$) \$300.00	Payee address; City; State; Zip Code P.O. Box 12902 Odessa, TX 79761
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH advertisement design.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 7/12 Rpt: 39/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 11/30/2023	6 Payee name Capitol Extension Gift Shop
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7 Amount (\$) \$2,989.50	8 Payee address; City; State; Zip Code 1400 N Congress Ave E1.006 Austin, TX 78701
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Holiday gifts for supporters.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/18/2023	Payee name Capitol Extension Gift Shop
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Amount (\$) \$1,731.96	Payee address; City; State; Zip Code 1400 N Congress Ave E1.006 Austin, TX 78701
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH Christmas gifts for supporters.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

Advertising Expense
Accounting/Banking
Consulting Expense
Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee

Event Expense
Fees
Food/Beverage Expense
Gift/Awards/Memorials Expense
Legal Services

Loan Repayment/Reimbursement
Office Overhead/Rental Expense
Polling Expense
Printing Expense
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense
Transportation Equipment & Related Expense
Travel in District
Travel Out of District
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 8/12 Rpt: 40/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 07/08/2023	6 Payee name Double Tree Hotel
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7 Amount (\$) \$506.62	8 Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 08/12/2023	Payee name Double Tree Hotel
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Amount (\$) \$306.54	Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 9/12 Rpt: 41/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 10/10/2023	6 Payee name Double Tree Hotel
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7 Amount (\$) \$215.28	8 Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/02/2023	Payee name Double Tree Hotel
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Amount (\$) \$399.92	Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 10/12 Rpt: 42/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 11/08/2023	6 Payee name Double Tree Hotel
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7 Amount (\$) \$216.89	8 Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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11 Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 11/12/2023	Payee name Double Tree Hotel
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Amount (\$) \$430.56	Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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Complete ONLY if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 11/12 Rpt: 43/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
--------------------------------------------------------------------	--------------------

5 Date 11/17/2023	6 Payee name Double Tree Hotel
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7 Amount (\$) \$215.28	8 Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 12/02/2023	Payee name Double Tree Hotel
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Amount (\$) \$184.28	Payee address; City; State; Zip Code 1617 N Interstate 35 Frontage Rd Austin, TX 78702
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Travel Out of District	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input checked="" type="checkbox"/> Check if Austin, TX, officeholder living expense Officeholder lodging for special session.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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EXPENDITURES MADE BY CREDIT CARD

SCHEDULE F4

EXPENDITURE CATEGORIES FOR BOX 10(a)

- | | | | |
|----------------------------------------------------------------------------------|-------------------------------|--------------------------------|--------------------------------------------|
| Advertising Expense | Event Expense | Loan Repayment/Reimbursement | Solicitation/Fundraising Expense |
| Accounting/Banking | Fees | Office Overhead/Rental Expense | Transportation Equipment & Related Expense |
| Consulting Expense | Food/Beverage Expense | Polling Expense | Travel in District |
| Contributions/ Donations Made By -
Candidate/Officeholder/Political Committee | Gift/Awards/Memorials Expense | Printing Expense | Travel Out of District |
| | Legal Services | Salaries/Wages/Contract Labor | OTHER (enter a category not listed above) |

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F4: Sch: 12/12 Rpt: 44/44	2 FILER NAME Landgraf, Brooks Frederick (The Honorable)	3 Filer ID (Ethics Commission Filers) 00069756
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4 TOTAL OF UNITEMIZED EXPENDITURES CHARGED TO A CREDIT CARD	\$ 5,075.42
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5 Date 07/22/2023	6 Payee name La Boutique Excentrique
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7 Amount (\$) \$735.67	8 Payee address; City; State; Zip Code 4060 Faudree Rd Ste. 107 Odessa, TX 79765
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9 TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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10 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Gift/Awards/Memorials Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH congratulations gifts for supporters.
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11 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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Date 09/14/2023	Payee name Monahans News
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Amount (\$) \$380.00	Payee address; City; State; Zip Code 107 W. 2nd St Monahans, TX 79756
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TYPE OF EXPENDITURE	<input checked="" type="checkbox"/> Political <input type="checkbox"/> Non-Political
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PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising Expense	(b) Description <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense COH print ad in newspaper.
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Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate/Officeholder name	Office sought	Office held
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